SEPA

Notification (

Hazardous Waste Six

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WHI TO THE

This initial notification information is required by Section 103(c) of the Comprehensive Environmental Response, Compensation, and Liability Act of 1980 and must be mailed by June 9, 1981

Please type or print in ink. If you need additional space, use separate sheets of paper. Indicate the letter of the item which applies.

A	Person Required to Notif	y
	Enter the name and address	

Enter the name and address of the person or organization required to netify NAME KERR BAN FURNITURE MFG. CO.

Street P.O. Box 1407

CITY SAN MARCOS

SING TX

Zip Code 78666

Site Location: TAD 49 CC1 2317

Enter the common name (if known) and actual location of the site.

Hame of Site KERE. BAN FURNITURE MFG. Co.

Street 1.S. 35 SOUTH

CAV SAN MARCOS

HATS State TR

Zip Code 78666

C. Person to Contact:

Enter the name, title (if applicable), and business telephone number of the person to contact regarding information submitted on this form

Name (Last, First and Title) HANSON, LARR-1

IND. ENGR.

Phone 512- 392. 6626

D Dates of Waste Handling:

Enter the years that you estimate waste treatment, storage, or disposal began and ended at the site

From (Year)

MAY OULY To (Year) 1977

E Waste Type: Choose the option you prefer to complete

Option I: Select general waste types and source categories. If you do not know the general waste types or sources, you are encouraged to describe the site in Item I—Description of Site.

General Type of Waste: Place an X in the appropriate boxes. The categories listed overlap. Check each applicable category. Source of Waste:

Place an X in the appropriate boxes

1. YO Organics

2. Inorganics

3 & Solvents

4 D Pesticides

S C II

5 Heavy metals

6. Acids

7. 🗆 Bases

8. D PCBs

9 Mixed Municipal Waste

10 🗆 Unknown

11. Other (Specify)

1.
Mining

2 Construction

3 Textiles

4 Fertilizer

5. Paper/Printing

6.

□ Leather Tanning

7. I Iron Steel Foundry

8. Chemical, General

9 Plating/Polishing

10. Military Ammunition

11

Electrical Conductors

12.

Transformers

13. D Utility Companies

14. Sanitary/Refuse

15 Photofinish

16 🗆 Lab/Hospital

17. 🗆 Unknown

18. X Other (Specify)

FURNITURE.

FINISHING WASTE

Option 2: This option is available to persons familiar with the Resource Conservation and Recovery Act (RCRA) Section 3001 regulations (40 CFR Part 261).

Specific Type of Waste:

EPA has assigned a four-digit number to each hazardous waite listed in the regulations under Section 3001 of RCRA. Eleappropriate four-digit number in the boxes provided. A cut the list of hazardous wastes and codes can be obtained by contacting the EPA Region serving the State in which the site is located.

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SUPERFUND

JUL 2 1 1992

REORGANIZED

Form Approved OMB No. 2000-0138 EPA Form 8900-1

Notification of Hazardous Waste S Side Two **Waste Quantity Total Facility Waste Amount Facility Type** Place an X in the appropriate boxes to 1 Piles cubic feet. indicate the facility types found at the site 2. Land Treatment gillions 55 To 350 In the "total facility waste amount" space 3 X Landfill give the estimated combined quantity 4 | Tanks Total Facility Area (volume) of hazardous wastes at the site 5. Impoundment using cubic feet or gallons square feet 100 6 Underground Injection In the "total facility area" space, give the estimated area size which the facilities 7. Druins, Above Ground acres occupy using square feet or acres 8. Drums, Below Ground 9 Other (Specify) Known, Suspected or Likely Releases to the Environment: Place an X in the appropriate boxes to indicate any known, suspected, ☐ Known ☐ Suspected ☐ Likely A None or likely releases of wastes to the environment. Note: Items Hand I are optional. Completing these items will assist EPA and State and local governments in locating and assessing hazardous waste sites. Although completing the items is not required, you are encouraged to do so. BURNER APPROXIMATE Sketch Map of Site Location: (Optional) 10' KIO' KB' Sketch a map showing streets, highways, routes or other prominent landmarks near the site Place an X on the map to indicate the site location. Draw an arrow showing the direction north. You may substitute a PLANT publishing map showing the site location. COVERED PIT. 1.5. 35 Description of Site: (Optional)

Describe the history and present conditions of the site. Give directions to the site and describe any nearby wells, springs, lakes, or housing. Include such information as how waste was disposed and where the waste came from. Provide any other information or comments which may help describe the site conditions.

A 10'X10'X B' DEEP PIT WAS DUG IN MAY 1977 FOR DISPOSAL OF SPRAY BOOTH WASTE & DIRTY LACQUER THINNER. WE WERE NOTIFIED BY THE TEXAS WATER CONTROL THAT SUCH A FACILITY WAS NOT ADVISABLE SO OUL! A SMALL AMOUNT WAS PLACED IN THE PIT THE PIT WAS COVERED OVER AND ALL WASTE SINCE THEN HAS BEEN PROPERLY DISPOSED OF OFFISITE.

J Signature and Title:

The person or authorized representative (such as plant managers, superintendents, trustees or attorneys) of persons required to notify must sign the form and provide a mailing address (if different than address in item A). For other persons providing notification, the signature is optional. Check the boxes which best describe the relationship to the site of the person required to notify. If you are not required to notify check "Other"

Name LARRY LANSON	Owner, Present Owner, Past Transporter
Street P.O. Box 1407	
City SAN MARCOS State Tx Zip Code 78666	Operator, Present Operator, Past
Signature Larry Harson Date 5/3/81	MOTHER IND. ENGR. / NGA